

The Wyoming Breast & Cervical Cancer Screening Program will reimburse only the following CPT codes for services provided in accordance with the program guidelines

January 2021

<i>CPT CODE</i>	<i>Service Description</i>	<i>2021 Max. Allowable Reimbursement Amount.</i>
99070	Supplies and materials -over and above those usually included with the office visit (list drugs,trays,supplies, or materials provided)	\$10.00
99202	Office visit – New patient- Expanded problem focused	\$73.97
99203	Office visit – New patient- Detailed	\$113.59
99204	Office visit – New patient-comprehensive history 45 min	\$170.44
99205	Office visit – New Patient- comprehensive history 60 min	\$224.97
99211	Office visit – New patient- Problem focused	\$23.83
99212	Office visit – Established patient- Problem focused	\$57.99
99213	Office visit – Established patient- Expanded problem focused	\$92.95
99214	Office visit – Established patient – Detailed History 25 min.	\$132.12
99385	Initial Preventive Medicine Evaluation -30-39 years	\$132.12
99386	Initial Preventive Medicine Evaluation -40-64 years	\$132.12
99387	Initial Preventive Medicine Evaluation -65 years and older	\$132.12
99395	Periodic Preventive Medicine Evaluation -30-39 years	\$92.95
99396	Periodic Preventive Medicine Evaluation -40-64 years	\$92.95
99397	Periodic Preventive Medicine Evaluation -65 years and older	\$92.95
76098	Radiological Examination Examination -surgical specimen	\$43.40
76098-TC	<i>Technical Component for performing- 76098</i>	\$28.28
76098-26	<i>Professional Component for interpretation of -76098</i>	\$15.15
76641	Ultrasound , complete examination of breast including axilla, unilateral	\$110.88
76641-TC	<i>Technical Component of- 76641</i>	\$75.72
76641-26	<i>Professional Component for interpretation of -76641</i>	\$35.17
76642	Ultrasound , Limited examination of breast including axilla, unilateral	\$90.76
76642-TC	<i>Technical component -76642</i>	\$58.02
76642-26	<i>Professional component-76642</i>	\$32.74
76942	Ultrasonic Guidance for Needle Biopsy -radiological supervision and interpretation	\$59.60
76942-TC	<i>Technical Component for performing-76942</i>	\$28.97

***The Wyoming Breast & Cervical Cancer Screening Program will
reimburse only the following CPT codes for services provided in
accordance with the program guidelines***

January 2021

76942-26	<i>Professional Component for interpretation-76942</i>	\$30.64
77053	Mammary ductogram or galactogram, single duct	\$57.87
77053-TC	Mammary ductogram or galactogram, single duct- Technical component	\$40.31
77053-26	Mammary ductogram or galactogram, single duct- Professional component	\$17.57
77046	Magnetic Resonance Imaging ,breast,with without contrast, unilateral	\$249.29
77046-TC	<i>Technical Component of -77046</i>	\$179.04
77046-26	<i>Professional Component for interpretation of -77046</i>	\$70.24
77047	Magnetic Resonance Imaging ,breast, without contrast, bilateral	\$255.50
77047-TC	<i>Technical Component of - 77047</i>	\$178.34
77047-26	<i>Professional Component for interpretation of- 77047</i>	\$77.17
77048	Magnetic Resonance Imaging ,breast,without/with contrast, including CAD when performed-unilateral	\$396.47
77048-TC	<i>Technical Component of-77048</i>	\$295.17
77048-26	<i>Professional Component for interpretation of-77048</i>	\$101.29
77049	Magnetic Resonance Imaging ,breast,without/with contrast, including CAD when performed-bilateral	\$404.71
77049-TC	<i>Technical Component of-77049</i>	\$293.77
77049-26	<i>Professional Component for interpretation of-77049</i>	\$110.94
77063	Screening Digital Breast Tomosynthesis	\$55.14
77063-TC	<i>Technical Component of - 77063</i>	\$26.20
77063-26	<i>Professional Component for interpretation of- 77063</i>	\$28.95
G0279	Tomosynthesis, Mammo	\$55.14
G0279-TC	<i>Technical Component of –G0279</i>	\$26.20
G0279-26	<i>Professional Component for interpretation of G0279</i>	\$28.95
77067	Screening Mammogram -bilateral including CAD	\$135.22
77067-TC	<i>Technical Component of-77067</i>	\$98.37
77067-26	<i>Professional Component for interpretation of –77067</i>	\$36.85
77066	Diagnostic Mammogram -bilateral including CAD	\$167.13
77066-TC	<i>Technical Component of –77066</i>	\$118.91

***The Wyoming Breast & Cervical Cancer Screening Program will
reimburse only the following CPT codes for services provided in
accordance with the program guidelines***

January 2021

77066-26	<i>Professional Component for interpretation of-77066</i>	\$48.22
77065	Diagnostic Mammogram -including CAD unilateral	\$132.33
77065-TC	<i>Technical Component of-77065</i>	\$93.06
77065-26	<i>Professional Component for interpretation of-77065</i>	\$39.27
87624	HPV-Papillomavirus , human, high risk types.	\$38.99
87625	HPV-Papillomavirus, types 16 and 18 only	\$40.55
88104	Cytopathology , nipple discharge only	\$68.69
88104-TC	<i>Technical Component of-88104</i>	\$41.38
88104-26	<i>Professional Component for interpretation of-88104</i>	\$27.32
88141	Cytopathology, cervical, requiring interpretation by physician	\$22.33
88142	Cytopathology, cervical, collected in preservative fluid, automated thin layer preparation, screening by cytotechnologist under physician supervision	\$22.51
88143	Cytopathology, cervical or vaginal, automated thin layer prep. Manual screening and rescreening under physician supervision	\$23.04
88164	Cytopathology ,smears up to three, screening by cytotechnologist under physician supervision, Bethesda System	\$14.99
88165	Cytopathology (conventional pap test),slides cervical or vaginal reported in Bethesda System, manual screening and rescreening under physician supervision	\$42.22
88172	Evaluation of Fine Needle Aspiration with or without preparation of smears	\$55.81
88172-TC	<i>Technical Component of-88172</i>	\$20.48
88172-26	<i>Professional Component for interpretation of-88172</i>	\$35.32
88173	Interpretation and Report of fine Needle Aspiration	\$158.63
88173-TC	<i>Technical Component of-88173</i>	\$88.67
88173-26	<i>Professional Component for interpretation of-88173</i>	\$69.87
88174	Cytopathology, cervical or vaginal, collected in preservative fluid, automated thin layer preparation, screening by automated system under physician supervision	\$25.37
88175	Cytopathology, cervical or vaginal, collected in preservative fluid, automated thin layer preparation, screening by automated system and manual screening, under physician supervision	\$29.44

***The Wyoming Breast & Cervical Cancer Screening Program will
reimburse only the following CPT codes for services provided in
accordance with the program guidelines***

January 2021

88177	Cytopathology, evaluation of fine needle aspirate; immediate cytohistologic study to determine adequacy of specimen , each separate episode	\$29.23
88177-TC	Cytopathology, evaluation of fine needle aspirate; immediate cytohistologic study to determine adequacy of specimen , each additional episode	\$7.44
88177-26	Cytopathology, evaluation of fine needle aspirate; immediate cytohistologic study to determine adequacy of specimen , each additional episode	\$21.80
88305	Surgical Pathology -Level IV-breast biopsy/cervical biopsy-per specimen	\$72.02
88305-TC	<i>Technical Component of-88305</i>	\$34.99
88305-26	<i>Professional Component for interpretation of-88305</i>	\$37.04
88307	Breast-Excision of lesion -Surgical pathology, gross and microscopic examination requiring microscopic evaluation of surgical margins	\$296.09
88307-TC	<i>Technical Component of-88307</i>	\$214.39
88307-26	<i>Professional Component for interpretation of-88307</i>	\$81.70
88329	Pathology consultation during surgery	\$59.60
88329	Pathology consultation during surgery-Facility Setting	\$35.52
88331	Frozen section evaluation of biopsy during surgery	\$105.49
88331-TC	<i>Technical Component for performing-88331</i>	\$43.85
88331-26	<i>Professional Component for interpretation of-88331</i>	\$61.65
88332	Each Additional Frozen Section	\$55.56
88332-TC	<i>Technical Component for performing-88332</i>	\$25.08
88332-26	<i>Professional Component for interpretation of-88332</i>	\$30.48
88341	Immunohistochemistry or immunocytochemistry, per specimen; Initial single antibody stain procedure	\$96.36
88341-TC	Immunohistochemistry or immunocytochemistry, per specimen; Initial single antibody stain procedure- <i>Technical component</i>	\$68.33
88341-26	Immunohistochemistry or immunocytochemistry, per specimen; Initial single antibody stain procedure- <i>Professional component</i>	\$28.03
88342	Immunohistochemistry	\$108.19
88342-TC	<i>Technical Component for performing-88342</i>	\$73.59

The Wyoming Breast & Cervical Cancer Screening Program will reimburse only the following CPT codes for services provided in accordance with the program guidelines

January 2021

88342-26	<i>Professional Component for performing-88342</i>	\$34.62
88360	Morphometric analysis, tumor immunohistochemistry , per specimen; Manual	\$127.50
88360-TC	<i>Technical Component for performing-88360</i>	\$85.99
88360-26	<i>Professional component for performing-88360</i>	\$41.53
88361	Morphometric analysis, tumor immunohistochemistry , per specimen; using computer assisted technology	\$127.05
88361-TC	<i>Technical Component for performing-88361</i>	\$83.86
88361-26	<i>Professional component for performing-88361</i>	\$43.19
57452	Colposcopy - Procedure by Physician	\$130.89
57452	Colposcopy -Facility Setting	\$93.00
57454	Colposcopy with biopsy (s) of cervix and/or cervical curettage – facility setting.	\$136.95
57454	Colposcopy with biopsy (s) of cervix and/or cervical curettage Procedure by Physician	\$175.19
57455	Colposcopy with biopsy(s) of the cervix -Facility Setting	\$111.46
57455	Colposcopy with biopsy(s) of the cervix -Procedure by Physician	\$167.75
57456	Colposcopy with endocervical curettage -Facility Setting	\$103.27
57456	Colposcopy with endocervical curettage -Procedure by Physician	\$157.80
57460	Colposcopy of cervix with loop electrode biopsy(s) of the cervix <i>Facility Setting</i>	\$163.30
57460	Colposcopy of cervix with loop electrode biopsy(s) of the cervix Procedure by Physician	\$342.09
57461	Colposcopy with loop electrode conization of the cervix -Facility Setting	\$108.24
57461	Colposcopy with loop electrode conization of the cervix -Procedure by Physician	\$380.13
57500	Biopsy , single or multiple, or local excision of lesion, with or without fulguration (separate procedure)-Facility Setting	\$76.91

The Wyoming Breast & Cervical Cancer Screening Program will reimburse only the following CPT codes for services provided in accordance with the program guidelines

January 2021

57500	Biopsy , single or multiple, or local excision of lesion, with or without fulguration (separate procedure)-Procedure by Physician	\$164.71
57505	Endocervical curettage (not done as part of a dilation and curettage)Procedure by Physician	\$156.58
57505	Endocervical curettage (not done as part of a dilation and curettage)-Facility setting	\$112.33
57520	Conization of the Cervix: with or without fulguration, with or without dilation and curettage -Facility Setting: Reimbursement allowed only when Cone is performed for diagnostic reasons.	\$305.15
57520	Conization of the Cervix: with or without fulguration, with or without dilation and curettage -Procedure by Physician: Reimbursement allowed only when Cone is performed for diagnostic reasons.	\$367.46
57522	Loop electrode excision -Facility Setting: Reimbursement allowed only when LEEP is performed for diagnostic reasons.	\$263.52
57522	Loop electrode excision -Procedure by Physician Reimbursement allowed only when LEEP is performed for diagnostic reasons.	\$315.22
58100	Endometrial sampling (biopsy) with or without endocervical sampling (biopsy), without cervical dilation, any method (separate procedure) Reimbursement allowed only after an AGUS Pap result. -Facility Charge	\$64.86
58100	Endometrial sampling (biopsy) with or without endocervical sampling (biopsy), without cervical dilation, any method (separate procedure) Reimbursement allowed only after an AGUS Pap result.	\$107.00
58110	Endometrial sampling (biopsy) performed in conjunction with colposcopy (list separately in addition to code for primary procedure) Reimbursement allowed only after an AGUS Pap result. -Facility Charge	\$40.99
58110	Endometrial sampling (biopsy) performed in conjunction with colposcopy (list separately in addition to code for primary procedure) Reimbursement allowed only after an AGUS Pap result.	\$51.97
19000	Puncture aspiration of cyst of breast -Facility setting	\$42.75
19000	Puncture aspiration of cyst of breast -Procedure by Physician	\$112.15
19001	Puncture aspiration of cyst of breast -each additional cyst- Surgical Facility	\$21.23
19001	Puncture aspiration of cyst of breast -each additional cyst-Procedure by Physician	\$27.24

The Wyoming Breast & Cervical Cancer Screening Program will reimburse only the following CPT codes for services provided in accordance with the program guidelines

January 2021

19081	Breast biopsy, with placement of localization device and imaging of biopsy specimen, percutaneous; stereotactic guidance; first lesion	\$602.16
19081	<i>Facility setting for 19081</i>	\$164.20
19082	Breast biopsy, with placement of localization device and imaging of biopsy specimen, percutaneous; stereotactic guidance; each additional lesion	\$484.83
19082	<i>Facility setting for 19082</i>	\$82.27
19083	Breast biopsy, with placement of localization device and imaging of biopsy specimen, percutaneous; ultrasonic guidance; first lesion	\$603.49
19083	<i>Facility setting for 19083</i>	\$155.25
19084	Breast biopsy, with placement of localization device and imaging of biopsy specimen, percutaneous; ultrasonic guidance; each additional lesion	\$476.25
19084	<i>Facility setting for-19084</i>	\$76.88
19085	Breast biopsy, with placement of localization device and imaging of biopsy specimen, percutaneous; magnetic resonance guidance; first lesion	\$930.18
19085	<i>Facility setting for-19085</i>	\$179.56
19086	Breast biopsy, with placement of localization device and imaging of biopsy specimen, percutaneous; magnetic resonance guidance; each additional lesion	\$740.11
19086	<i>Facility setting for-19086</i>	\$89.33
19100	Biopsy of breast-Needle Core-Surgical Facility	\$69.49
19100	Biopsy of breast-Needle Core-Surgical Procedure by Physician	\$552.99
19101	Incisional biopsy of breast-Surgical Facility	\$226.98
19101	Incisional biopsy of breast-Surgical Procedure by Physician	\$1073.03
19120	Excision of Cyst-Breast-Surgical Facility	\$423.41
19120	Excision of Cyst-Breast-Procedure by Physician	\$1073.03
19125	Excision of Breast Lesion-Identified by pre-op placement of radiological marker, single lesion-Surgical Facility	\$469.40
19125	Excision of Breast Lesion-Identified by pre-op placement of radiological marker, single lesion-Procedure by Physician	\$1073.03
19126	Excision of Breast Lesion-Identified by pre-operative placement of radiological marker, each additional.	\$160.85

***The Wyoming Breast & Cervical Cancer Screening Program will
reimburse only the following CPT codes for services provided in
accordance with the program guidelines***

January 2021

19281	Placement of breast localization device, percutaneous; mammographic guidance; first lesion	\$256.81
19281	<i>Facility setting for -19281</i>	\$98.53
19282	Placement of breast localization device, percutaneous; mammographic guidance; each additional lesion	\$184.37
19282	<i>Facility setting for-19282</i>	\$49.12
19283	Placement of breast localization device, percutaneous; stereotactic guidance; first lesion	\$283.90
19283	<i>Facility setting for-19283</i>	\$99.43
19284	Placement of breast localization device, percutaneous; stereotactic guidance; each additional lesion	\$217.78
19284	<i>Facility setting for-19284</i>	\$50.31
19285	Placement of breast localization device, percutaneous; ultrasonic guidance; first lesion	\$455.03
19285	<i>Facility setting for-19285</i>	\$84.69
19286	Placement of breast localization device, percutaneous; ultrasonic guidance; each additional lesion	\$385.99
19286	<i>Facility setting for-19286</i>	\$42.19
19287	Placement of breast localization device, percutaneous; magnetic resonance; first lesion	\$782.43
19287	<i>Facility setting for-19287</i>	\$125.99
19288	Placement of breast localization device, percutaneous; magnetic resonance; each additional lesion	\$620.82
19288	<i>Facility setting for-19288</i>	\$63.17
10021	Fine needle aspiration -Without imaging guidance	\$107.94
10021	Facility setting for performing 10021	\$55.18
10022	Fine needle aspiration -With imaging guidance	\$93.60
10022	Facility setting for performing 10022	\$72.47
10004	Fine needle aspiration biopsy without imaging guidance, each additional lesion- <i>Facility setting</i>	\$43.15
10004	Fine needle aspiration biopsy without imaging guidance, each additional lesion	\$52.34
10005	Fine needle aspiration biopsy including ultrasound guidance, first lesion- <i>Facility setting</i>	\$72.01

***The Wyoming Breast & Cervical Cancer Screening Program will
reimburse only the following CPT codes for services provided in
accordance with the program guidelines***

January 2021

10005	Fine needle aspiration biopsy including ultrasound guidance, first lesion.	\$141.05
10006	Fine needle aspiration biopsy including ultrasound guidance-each additional lesion- <i>Facility Setting</i>	\$50.42
10006	Fine needle aspiration biopsy including ultrasound guidance-each additional lesion	\$61.74
10007	Fine needle aspiration biopsy including fluoroscopic guidance, first lesion- <i>Facility setting</i>	\$91.54
10007	Fine needle aspiration biopsy including fluoroscopic guidance, first lesion.	\$326.29
10008	Fine needle aspiration biopsy including fluoroscopic guidance, each additional lesion- <i>Facility setting</i>	\$58.62
10008	Fine needle aspiration biopsy including fluoroscopic guidance, each additional lesion.	\$172.63
10009	Fine needle aspiration biopsy including CT guidance, first lesion- <i>Facility setting.</i>	\$111.44
10009	Fine needle aspiration biopsy including CT guidance, first lesion-	\$500.55
10010	Fine needle aspiration biopsy including CT guidance-each additional lesion- <i>Facility setting.</i>	\$80.30
10010	Fine needle aspiration biopsy including CT guidance, each additional lesion	\$293.46
10011	Fine needle aspiration biopsy including MRI guidance, first lesion- <i>Facility setting</i>	\$80.30
10011	Fine needle aspiration biopsy including MRI guidance, first lesion-	\$500.55
10012	Fine needle aspiration biopsy including MRI guidance, first lesion- <i>Facility setting.</i>	\$80.30
10012	Fine needle aspiration biopsy including MRI guidance, first lesion-	\$293.40
00400	Anesthesia for procedures on anterior integumentary system of chest	\$26.50 Conv. factor